



COVID-19 and Iranian older people: rehabilitation perspective

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To cite this article: Shabnam ShahAli, Shiva ShahAli, Ismail Ebrahimi Takamjani & Saeed Shahabi (2020) COVID-19 and Iranian older people: rehabilitation perspective, European Journal of Physiotherapy, 22:5, 309-310, DOI: [10.1080/21679169.2020.1783112](https://doi.org/10.1080/21679169.2020.1783112)

To link to this article: <https://doi.org/10.1080/21679169.2020.1783112>



Published online: 02 Jul 2020.



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COVID-19 and Iranian older people: rehabilitation perspective

World Health Organisation (WHO) announced coronavirus disease 2019 (COVID-19) as a pandemic on 11 March 2020. As of 20 May 2020, COVID-19 is affecting 215 countries and territories around the world. The COVID-19 initially was confirmed in Qom, Iran, on 19 February 2020, and rapidly spread in all provinces. The coronavirus outbreak poses a considerable challenge to human health, especially to vulnerable groups such as older people. According to the Islamic Republic News Agency (IRNA) [1], the mortality rate in the patients over 60 years old was higher than other age groups, that indicates a serious threat to aged people's life and health. The purpose of this paper is to find out what happens to older people in Iran based on our professional observations and comments which are heard from these people.

Based on the WHO report [2], older people have many health problems such as hearing loss, cataract, back and neck pain, osteoarthritis, chronic obstructive pulmonary disease (COPD), diabetes, stroke and myocardial infarction (MI) that necessitate them rehabilitating. Some common health problems in older people, such as stroke, MI or COPD, need daily and early rehabilitation. Early rehabilitation following these disorders has beneficial effects on elderly patient's physical function and prevents disability [3,4]. Delayed treatment may cause serious and irreversible complications for older patients. Rehabilitation centres in Iran are commonly out-hospital clinics, the in-hospital clinics are mostly limited to university hospitals. The nursing homes and elder daycare centres (either privately funded or government funded) are critical sources of care for older people who can no longer live in their own home. In the wake of the COVID-19 pandemic, most of the private rehabilitation facilities have reduced the number of their employees, working hours or have been closed. As a result, in-hospital rehabilitation facilities have become too crowded and can be sources for virus transmission.

Aging is associated with the reduction in physical function and increasing sedentary behaviour [5,6]. Regular physical activity benefits both the body and mind, it can reduce high blood pressure, help to manage weight, reduce the risk of heart disease, stroke, type 2 diabetes, and various cancers. All these conditions make patients susceptible to COVID-19 [7]. Due to reduction of muscle strength and coordination of the lower extremities, gait and balance control will be impaired in older people. These impairments increase the risk of disability and falling among older people [5,8]. Falling is one of the sources of death and nonfatal injuries in older people [9]. In many big cities of Iran, to deal with this problem, older people have daily walking and aerobic exercise programme in the parks. Walking is a common form of physical activity in healthy older people [10]. Since the COVID-19 outbreak, all city parks and walking trails have been closed.

It may possibly increase the risk of physical inactivity and social isolation in older people. Substituting traditional face-to-face approach with feasible alternative approaches such as tele-rehabilitation, can be helpful [11]. This approach is now used in some rehabilitation centres for therapy, assessment and follow up. Also, video-conferencing can be used for implementing some types of rehabilitation services and providing video consultation and instructions.

Older people need more health care and rehabilitation services [12,13] than other age groups and this requires high funds. In Iran, some old people, especially old women are financially dependent on their families [14]. The current situation has affected most people's jobs and caused an economic recession, considering that some Iranian old people do not have any type of health insurance coverage [14], many families need to be supported financially. Due to financial problems, some families provide rehabilitation cares for their aged relatives themselves, without receiving any training. As a result, family education through educational CDs or video-conferencing can prevent further health problems, disabilities and reduces the expenditures.

Another aspect of the problems is assistive products. The use of assistive products increases with age [15,16]. Spectacles, hearing aids, wheelchairs, canes, crutches, walkers and prostheses are examples of assistive products used by older people. Repairing or buying these devices is difficult in the current situation.

Considering the challenges and problems that some of them are highlighted in this paper, the rehabilitation system and services should be considered as an important need for Iranian older people.

Author contributions

All authors have contributed to preparing the manuscript.

Disclosure statement

No potential conflict of interest was reported by the author(s).


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References

- [1] Coronavirus disease 2019 (COVID-19); 2020 [cited 2020 May 15]. Available from: <https://www.irna.ir/news/83712959/%D8%A8%DB%8C%D8%B4%DB%8C%D9%86%D9%87-%D9%88-%DA%A9%D9%85%DB%8C%D9%86%D9%87-%D8%B3%D9%86-%D8%A7%D8%A8%D8%AC%D9%84%D8%A7-%D9%88-%D9%81%D9%88%D8%A>

- A-%D9%86%D8%A7%D8%B4%D8%8C-%D8%A7%D8%B2-%DA%A9%D8%B1%D9%88%D9%86%D8%A7-%D8%AF%D8%B1-%D8%A7%D8%8C%D8%B1%D8%A7%D9%86.
- [2] World Health Organization. Global health and aging; 2020 [cited 2020 May 15]. Available from: URL: https://www.who.int/ageing/publications/global_health.pdf
 - [3] Lui SK, Nguyen MH. Elderly stroke rehabilitation: overcoming the complications and its associated challenges. *Curr Gerontol Geriatr Res*. 2018;2018:9853837.
 - [4] Bruun IH, Maribo T, Norgaard B, et al. The effect of systematic functional assessment and immediate rehabilitation on physical performance in acutely admitted older adults with reduced functional performance: a randomised clinical trial. *Disabil Rehabil*. 2020;42(1):53–62.
 - [5] Thomas E, Battaglia G, Patti A, et al. Physical activity programs for balance and fall prevention in elderly: a systematic review. *Medicine (Baltimore)*. 2019;98(27):e16218.
 - [6] Freire Junior RC, Fernandes TG, Borges GF, et al. Factors associated with low levels of physical activity among elderly residents in a small urban area in the interior of the Brazilian Amazon. *Arch Gerontol Geriatr*. 2018;75:37–43.
 - [7] World Health Organization. HealthyAtHome – physical activity; 2020 [cited 2020 May 19]. Available from: URL: <https://www.who.int/news-room/campaigns/connecting-the-world-to-combat-coronavirus/healthyathome/healthyathome—physical-activity>. (Accessed May 19, 2020).
 - [8] Matsuda PN, Eagen T, Hreha KP, et al. Relationship between fear of falling and physical activity in people aging with a disability. *PM R*. 2020;12(5):454–461.
 - [9] Dellinger AM, Stevens JA. The injury problem among older adults: mortality, morbidity and costs. *J Safety Res*. 2006;37(5):519–522.
 - [10] Okubo Y, Osuka Y, Jung S, et al. Walking can be more effective than balance training in fall prevention among community-dwelling older adults. *Geriatr Gerontol Int*. 2016;16(1):118–125.
 - [11] Jalali M, Shahabi S, Bagheri Lankarani K, et al. COVID-19 and disabled people: perspectives from Iran. *Disabil Soc*. 2020;35(5):844–844.
 - [12] Joseph O, Mary T, Stephanie S, et al. *Hazzard's geriatric medicine and gerontology*, 6th ed. New York: McGraw-Hill; 2009.
 - [13] Vincent C, Deaudelin I, Robichaud L, et al. Rehabilitation needs for older adults with stroke living at home: perceptions of four populations. *BMC Geriatr*. 2007;7:20.
 - [14] Amini R, Ingman S, Sahaf R. Aging in Iran: past, present and future. *J Aging Emerg Econ*. 2013;4:17–34.
 - [15] Kraskowsky LH, Finlayson M. Factors affecting older adults' use of adaptive equipment: review of the literature. *Am J Occup Ther*. 2001;55(3):303–310.
 - [16] Häggblom-Kronlöff G, Sonn U. Use of assistive devices – a reality full of contradictions in elderly persons' everyday life. *Disabil Rehabil Assist Technol*. 2007;2(6):335–345.

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Received 3 June 2020; revised 7 June 2020; accepted 9 June 2020

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